								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECOI Effective October 1, 2000								09285738					
		CLAIMS AS	(Column 1) (Colum			mn 2)	SMALL TYPE		NTITY	OR	OTHER SMALL		
TOTAL CLAIMS			.36		er en		R/	ATE	FEE		RATE	FEE	
FOR			NUMBER I	FILED	NUMBER EXTRA		BAS	BASIC FEE 355.00		OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			49 min	us 20=	. 29		XS	X\$ 9= 261,00		OR	X\$18=		
INDEPENDENT CLAIMS				nus 3 =	<u> </u>	17		X40= 6800.0		OR	X80=		
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT	<del></del>	· · · · · · ·	+13		35=	135,00	OR	+270=	5) <del>2</del> 12 2.	
* <b>i</b> f	the difference	in column 1 is	less than zero, enter "0" in column 2				TOTAL 1351,00		į i	TOTAL	270,00		
	С	LAIMS AS A	MENDED - PART II						1431.0		OTHER	THAN	
_		(Column 1)				(Column 3)	SM	ALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	and the same	CLAIMS REMAINING AFTER AMENDMENT	<b>₩</b>	HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	XS	9=		OR	X\$18=		
	Ind pendent	*	Minus	***		=	X	10=		OR	X80=		
إا	FINST PHESE	NTATION OF MI	JLIIPLE DEF	ENDEN	CLAIM		+1	35=		OR	+270=		
								OTAL		OR	TOTAL		
		(Column 3)	AUUI	r. FEE	<del></del>		ADDIT. FEE	<del> </del>					
AMENDMENT B		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colui HIGH NUM PREVIO PAID	IEST BER OUSLY	PRESENT EXTRA	RA	ATE.	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	10=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							35=		OR	+270=		
(Column 1) (Column 2) (Column 3)								OTAL I. FEE		ÖR	TOTAL ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE	: :	RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent		Minus	***		=	X4	0=		OD	X80=		
ا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	}		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **ODIT. FEE										OR	TOTAL ADDIT. FEE		
		ber Previously Pai					found in	tha an	nronriate ho	v in co	lumn 1		